## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

N36-137/37MM4

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE O			OTHER THAN		
TOTAL CLAIMS			14					RATE	FEE	1	RATE	FEE	
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
то	TAL CHARGEA	BLE CLAIMS	14 min	us 20=	* Ø			X\$ 9=	i	OR	X\$18=		
IND	EPENDENT CL	AIMS	A mi	* Ø			X42=		OR	X84=			
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0"						olumn 2		TOTAL	<u> </u>	OR	TOTAL	740	
CLAIMS AS AMENDED - PART II									<b></b>		OTHER	THAN	
		(Column 1)	(Column 2) HIGHEST			(Column 3	<b>/</b>	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT			IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total J	. 14	Minus	**		= /		X\$ 9=		OR	X\$18=		
	Independent	* ATATION OF M	Minus	Minus *** LTIPLE DEPENDEN		=/ 	4	X42=		OR	X84=		
L	FIRST FRESE	NIATION OF W	OLIPLE DE	ENDEN	CLAIN	(	٤	+140=		OR	+280=		
										OR	TOTAL ADDIT. FEE		
	ADDIT. FEE												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>J</b>	140					
								+140=		OR	+280=		
	TOTAL ADDIT. FEE ADDIT. FEE												
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST													
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		<u> </u>	┧╽	X42=		OR	X84=		
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.142			.000		
+140=  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEEOR ADDIT. FEEOR													
		nb r Previously Pa						ınd in the app	ropriate box	in col	umn 1.	. !	